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FAX TRANSMITTAL**RECEIVED**
CENTRAL FAX CENTER**JAN 10 2005****TO:** Examiner Len Tran**FAX:** 703-872-9306**CC:****FROM:** Robert Brunet; Anissimoff and
Associates**MATTER #:** 941915**DATE:** January 10, 2005**# OF PAGES:** 9**RE:** Response to Office Action

Appl. No. : 10/706,273
Applicant : Alain Renaud Boulet
Filed : November 13, 2003
TC/A.U. : 1725
Examiner : Len Tran

Confirmation No. 5644

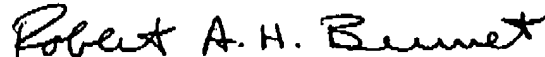
Docket No. : 941915
Customer No. : 33798

In response to the Office Action dated November 24, 2004, please find enclosed the following:

1. Transmittal (1 page)
2. Response to Office Action (7 pages)

We look forward to receiving confirmation of filing of the response by return facsimile.

Sincerely,
ANISSIMOFF AND ASSOCIATES



Per: Robert A.H. Brunet

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PTO/SB/21 (09-04)

Approved for use through 07/31/2008. OMB 0651-0031

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/706,273
	Filing Date	November 13, 2003
	First Named Inventor	BOULET, Alain Renaud
	Art Unit	1725
	Examiner Name	Len Tran
	Attorney Docket Number	941915
Total Number of Pages In This Submission		8

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks 		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Anissimoff & Associates, 33798	
Signature	<i>Robert A. H. Brunet</i>	
Printed name	Robert A. H. Brunet	
Date	January 10, 2005	Reg. No. 55,158

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:		
Signature	<i>Robert A. H. Brunet</i>	
Typed or printed name	Robert A. H. Brunet	Date January 10, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

AMENDMENT/RESPONSE

Sir:

In response to the Office action of **November 24, 2004**, please consider the following amendment/response. Please amend the application as follows:

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks/Arguments begin on page 5 of this paper.